

## PART B - FEE(S) TRANSMITTAL

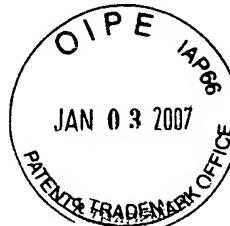
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00758 7590 10/18/2006

FENWICK & WEST LLP  
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Albert C. Smith	(Depositor's name)
<i>A. C. Smith</i>	(Signature)
12/28/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/706,225	11/11/2003	Alan S. Broad	18856-08278	6323

TITLE OF INVENTION: SYSTEM AND METHOD FOR UPDATING A NETWORK OF REMOTE SENSORS

01/04/2007 EHAILE2 00000049 10706225

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DATE DUE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	
nonprovisional	YES	\$700	\$0	\$0	\$700	01/18/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
EDWARDS JR, TIMOTHY	2612	340-870040

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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1 Fenwick & West LLP

2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Crossbow Technology, Inc.

San Jose, California

Reel/Frame 015015/0656

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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*A. C. Smith*

Date \_\_\_\_\_

*12/28/06*

Typed or printed name \_\_\_\_\_

Albert C. Smith

Registration No. \_\_\_\_\_

*20,355*

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## TRANSMITTAL FORM

*(to be used for all correspondence during pendency of filed application)*

		Application Number	10/706,225
		Filing Date	November 11, 2003
		First Named Inventor	Alan S. Broad
		Group Art Unit Number	2612
		Examiner Name	Timothy Edwards, Jr.
Total Number of Pages in This Submission	3	Attorney Docket Number	18856-08278

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Check Enclosed (\$700)  <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <ul style="list-style-type: none"> <li><input type="checkbox"/> Copies of IDS Cited References</li> </ul> <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [ ] Page(s) <ul style="list-style-type: none"> <li><input type="checkbox"/> After Final</li> </ul> <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input checked="" type="checkbox"/> Issue Fee Transmittal (in duplicate) <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): <ul style="list-style-type: none"> <li>[ ] Sheet(s) of Figure(s) [ ]</li> </ul> <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <ul style="list-style-type: none"> <li>_____</li> <li>_____</li> <li>_____</li> <li>_____</li> <li>_____</li> <li>_____</li> <li>_____</li> <li>_____</li> </ul>
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### REMARKS:

### SIGNATURE OF ATTORNEY OR AGENT

Signature:	<i>A.C. Smith</i>		
Attorney/Reg. No.:	Albert C. Smith, Reg. No. 20,355	Dated:	12/28/06

### CERTIFICATE OF MAILING

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Typed or Printed Name:	Albert C. Smith	Dated:	12/28/06
Express Mail Mailing Number (optional):			